

COMMUNICATION SERVICE AUTHORIZATION

1. AUTHORIZATION		2. AUTHORIZATION		3. CIRCUIT OR BILL NUMBER	
a. NUMBER	b. DATE (YYYYMMDD)	a. NUMBER	b. DATE (YYYYMMDD)		
4. FROM (Include ZIP Code)		5. SUBMIT BILLS FOR CERTIFICATION TO (Include ZIP Code)			
6. TO (Communications Company)		7. TELEPHONE NUMBER TO CONTACT FOR DETAILS (Include Area Code)			
a. COMPANY NAME		8. AUTHORIZATION. In accordance with provisions of the contract indicated above of which this authorization forms a part, authority is hereby given to Communications Company indicated in Item 6 to establish or perform services for official use as prescribed below at:			
b. ADDRESS (1) STREET					
(2) CITY	(3) STATE	(4) ZIP CODE			
9. SERVICE(S)					
DESCRIPTION a.	NUMBER b.	NON-RECURRING CHARGE c.	d. RATE PER MONTH		
			PER UNIT (1)	TOTAL (2)	
10. DISBURSING OFFICER MAKING PAYMENT		11. DISTRIBUTION			
a. NAME (Last, First, Middle Initial)					
12. AUTHORIZING OFFICIAL					
a. SIGNATURE					
b. TITLE		c. GRADE			
13. ACCEPTANCE					
a. NAME OF CONTRACTING FIRM		b. SIGNATURE OF CONTRACTOR'S REPRESENTATIVE			c. DATE SIGNED (YYYYMMDD)